PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CH920030065 US/

		CLAIMS AS		-	ımn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	OTAL CLAIMS		(Column	_'/	100.2] [RATE	FEE	7	RATE	FEE
			39				┨	BASIC FEE	{ 	 		
FO			NUMBER	FILED	 	BER EXTRA	1 1	BASIC FEL	385.00	OR	BASIC FEE	770.00
то	OTAL CHARGEA	ABLE CLAIMS	3.9 min	3,9 minus 20=		* . 19		X\$ 9=		OR	X\$18=	342
	DEPENDENT CI			/ minus 3 =]	X43=		OR	X86=	878
MU	LTIPLE DEPEN	NDENT CLAIM PI	RESENT —			Z]	+145=	145	OR	+290=	290
* If	the difference	e in column 1 is	less than ze	∍ro, enter	"0" in c	olumn 2		TOTAL		OR	TOTAL	148-8
	C	CLAIMS AS A	MENDED) - PAR	TII					•	OTHER	
		(Column 1)		(Colun		(Column 3)	<u>.</u>	SMALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=] [X43=		OR	X86=	
Ш	FIRST PHESE	ENTATION OF MU	JETIPLE DEP	ENDEN	CLAIM		, [+145=		OR	+290=	
							L	TOTAL		اا	TOTAL	
		(Column 1)		.(Colum	mn 2)	(Column 3)		DDIT. FEE		J ,	ADDIT. FEE	
		CLAIMS		HIGH	IEST] [ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	3: 4154	=	1 [X43=		OR	X86=	
Ш	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDEN	CLAlivi		, [+145=		OR	+290=	
						,	L	TOTAL		\ L	TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
	\	(Column 1)		(Colum		(Column 3)	1					
AMENDMENT C		REMAINING AFTER AMENDMENT	·	NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDA	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If	f the "Highest Nun	mber Previously Pai mber Previously Pai	id For IN THIS	S SPACE is	less than	n 20, enter "20."	. AE	TOTAL DDIT. FEE		OR A	TOTAL ADDIT. FEE	
		nber Previously Paid					er found	d in the appr	ropriate box	in coh	umn 1.	